

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB AF	PRO	VAL
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hours per response......16.00

OMB Number:

3235-0076

Expires:

May 31, 2005

Estimated average burden



Name of Offering (check if this is an amendment and name has changed, Limited Partnership Interests	and indicate change.)
• • • • • • • • • • • • • • • • • • • •	ule 506 Section 4(6) ULOE
A. BASIC IDENTIFICATION D.	ATA
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and Deltec Recovery Fund, L.P.	d indicate change.)
Address of Executive Offices (Number and Street, City, State, Zip Code) 645 Fifth Avenue, New York, NY 10022	Telephone Number (Including Area Code) (212) 546-6200
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) Same as executive offices	Telephone Number (Including Area Code) PROCESSED
Brief Description of Business Investing in securities.	JUI 20 2013 B
Type of Business Organization corporation business trust Imited partnership, already formed Imited partnership, to be formed	other (please specify):
Actual or Estimated Date of Incorporation or Organization Month 1 0 Jurisdiction of Incorporation or Organization: (Enter two letter U.S. Posta	Year 0 0 Estimated al Service abbreviation for
State: CN for Canada; FN	for other foreign jurisdiction) D E
GENERAL INSTRUCTIONS: Federal:	
Who Must File: All issuers making an offering of securities in reliance on an exemption under U.S.C. 77d(6).	Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15
When to File: A notice must be filed no later than 15 days after the first sale of securities in the o Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address which it is due, on the date it was mailed by United States registered or certified mail to that address	s given below or, if received at that address after the date on
Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, I	
Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be photocopies of the manually signed copy or bear typed or printed signatures.	be manually signed. Any copies not manually signed must be
Information Required: A new filing must contain all information requested. Amendments need thereto, the information requested in Part C, and any material changes from the information preneed not be filed with the SEC.	
Filing Fee: There is no federal filing fee. State:	
This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULUCE and that have adopted this form. Issuers relying upon ULOE must file a separate notice wibe, or have been made. If a state requires the payment of a fee as a precondition to the claim for this form. This notice shall be filed in the appropriate states in accordance with state law. The A be completed.	ith the Securities Administrator in each state where sales are to or the exemption, a fee in the proper amount shall accompany
ATTENTION	
Failure to file notice in the appropriate states will not result in a loss of the federal appropriate federal notice will not result in a loss of an available state exemption	l exemption. Conversely, failure to file the
appropriate federal notice will not result in a loss of an available state exemption a federal notice.	unices such exemption is predicated on the filing of

A. BASIC IDENTIFICATION DATA
2. Enter the information requested for the following:
• Each promoter of the issuer, if the issuer has been organized within the past five years;
 Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% of more of a class of equity securities of the issuer;
• Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
Each general and managing partner of partnership issuers.
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual) Deltec Partners, LLC
Business or Residence Address (Number and Street, City, State, Zip Code) 645 Fifth Avenue, New York, NY 10022
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner*
Full Name (Last name first, if individual) Deltee Asset Management, LLC
Business or Residence Address (Number and Street, City, State, Zip Code) 645 Fifth Avenue, New York, NY 10022
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ** Director General and/or Managing Partner
Full Name (Last name first, if individual) Byrnes, Arthur E.
Business or Residence Address (Number and Street, City, State, Zip Code 645 Fifth Avenue, New York, NY 10022
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ** Director General and/or Managing Partner
Full Name (Last name first, if individual) Gordon, John R.
Business or Residence Address (Number and Street, City, State, Zip Code) 645 Fifth Avenue, New York, NY 10022
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer ** Director General and/or Managing Partner
Full Name (Last name first, if individual) Zuppello, Stephen
Business or Residence Address (Number and Street, City, State, Zip Code) 645 Fifth Avenue, New York, NY 10022
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner
Full Name (Last name first, if individual)
Business or Residence Address (Number and Street, City, State, Zip Code)

* of Member Manager of General Partner and Adviser to Issuer ** of Member Manager of General Partner

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

				В. І	NFORMAT	ION ABOU	Γ OFFERIN	G							
1.	Has the issuer sol	d, or does th	e issuer inten	d to sell, to r	non-accredited	d investors in	this offering	?			Yes	No 🔯			
	Answer also in A	ppeńdix, Col	lumn 2, if fili	ng under UL	OE.										
2.	What is the minin	num investm	ent that will	be accepted :	from any indi	vidual?					\$ <u>250,000.00</u> *				
:	*\$1,000,000.00 minimum investment for institutions; either may be waived by General Partner									*_ <u>=======</u>					
3.	Does the offering permit joint ownership of a single unit?								Yes ⊠	No					
:	Enter the informa solicitation of purdealer registered persons of such a	rchasers in c	onnection w	ith sales of s a state or sta	securities in that ates, list the n	he offering.	If a person t	to be listed is er. If more t	s an associate	d person or	agent of a b	oroker or			
Full N	ame (Last name	first, if indiv	idual)												
Delte	Asset Managem	ent LLC													
Busin	ess or Residence	Address (Nu	mber and Str	eet, City, Sta	ate, Zip Code)									
645 F	ifth Avenue, New	York, NY 1	0022												
Name	of Associated Br	oker or Deal	ler												
Same				**											
	in Which Person										_	-			
	ck "All States" or		·								_	All States			
X [Al		[AZ]	[AR]	X[CA]	X [CO]	X [CT]	X [DE]	X [DC]	X [FL]	[GA]	[HI]	[ID] X [MO]			
X [IL] [MT]		[IA] [NV]	X [KS] X [NH]	[KY] X [NJ]	[LA] X [NM]	X [ME] X [NY]	X [MD] X [NC]	X [MA] [ND]	X [MI] [OH]	[MN] [OK]	[MS] [OR]	X [PA]			
X [RI]		[SD]	X [TN]	X [TX]	[UT]	X [VT]	X [VA]	[WA]	[WV]	[WI]	[WY]	(PR)			
Full N	ame (Last name i	first, if indiv	idual)												
Busin	ess or Residence	Address (Nu	mber and Str	eet, City, Sta	ate, Zip Code))		11 11 11 11 11 11							
Name	of Associated Br	oker or Deal	er		· · ·										
States	in Which Person	Listed Has	Solicited or In	ntends to Sol	icit Purchaser	rs									
(Chec	k "All States" or	check indivi	dual States)			***************************************	***************************************					All State			
[AL] [AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]			
[MT	-	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
Full N	lame (Last name	first, if indiv	idual)												
Busin	ess or Residence	Address (Nu	mber and Str	eet, City, Sta	ate, Zip Code))									
Name	of Associated Br	oker or Deal	er												
States	in Which Person	Listed Has	Solicited or I	ntends to Sol	licit Purchaser	rs									
(Chec	k "All States" or										_	All State			
[AL		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI] [MS]	[ID]			
[IL]		[IA]	[KS]	[KY]	[LA]	[ME]	[MD] [NC]	[MA] [ND]	[MI] [OH]	[MN] [OK]	[MS] [OR]	[MO] [PA]			
[M]		[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[WV]	[UK]	[WY]	[PR]			

[TN] [TX] [UT] [VT] [VA] [WA] [W (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	Aggregate	Amo	ount Already
Type of Security	Offering Price		Sold
Debt	\$ -0-	\$	-0-
Equity	\$ -0-	\$	-0-
☐ Common ☐ Preferred			
Convertible Securities (including warrants)	\$ -0-	\$	-0-
Partnership Interests	\$ 50,000,000	<u>\$</u>	25,601,083
Other (Specify)	\$ -0-	\$	-0-
Total	\$ 50,000,000	\$	25,601,083
Answer also in Appendix, Column 3, if filing under ULOE.			
Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."			
	Number Investors	Dol	Aggregate llar Amount Purchases
Accredited Investors	 59	<u>\$</u>	23,572,203
Non-accredited Investors	\$ 2	\$	2,028,880
Total (for filings under Rule 504 only)	 	\$	
Answer also in Appendix, Column 4, if filing under ULOE.			
If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.			
Type of offering	Type of Security	Dol	llar Amount Sold
Rule 505	o country	\$	
Regulation A	 		
Rule 504	 		
Total	 		
rotar	 	J	
a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.			
Transfer Agent's Fees		\$	-0-
Printing and Engraving Costs		\$	-0-
Legal Fees	⋈	\$ <u>136,1</u>	<u>53</u>
Accounting Fees	⋈	\$ <u>38,95</u>	<u>7</u>
Engineering Fees		\$	-0-
Sales Commissions (specify finders' fees separately)		\$	-0-
Other Expenses (identify)		\$	-0-
Total	⊠	\$ <u>175,1</u>	10

	Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross roceeds to the issuer."					\$ 49.824.890_			
5.	Indicate below the amount of the adjusted gross proceeds t each of the purposes shown. If the amount for any purpose the box to the left of the estimate. The total of the pay proceeds to the issuer set forth in response to Part C - Quest	is not known, furnish an esti ments listed must equal the	mate and check						
					Payments to Officers, Directors, & Affiliates	Р	ayments To Others		
	Salaries and fees			\$	1	□ s	0-		
	Purchase of real estate			\$	-0-	□ \$	0-		
	Purchase, rental or leasing and installation of machine	ry and equipment		\$	-0-	□ \$	-0-		
	Construction or leasing of plant buildings and facilitie	s		\$	-0-	□ \$	-0		
	Acquisitions of other businesses (including the value of								
	offering that may be used in exchange for the assets of pursuant to a merger)			\$	-0-	□ s	-0		
	Repayment of indebtedness			\$	-0-	□ \$	-0-		
	Working capital			\$	-0-	⊠ <u>\$</u>	49,824,890		
	Other (specify):			S	-0-	□ \$	-0-		
	issuer has duly caused this notice to be signed by the under	D. FEDERAL SIGNATURE	n. If this notice is	file		05, the follo	owing signature		
	titutes an undertaking by the issuer to furnish to the U.S. Sec ne issuer to any non-accredited investor pursuant to paragraph		ission, upon writter	n rec	quest of its staf	f, the inforn	nation furnished		
lssu	er (Print or Type)	Signature		D	ate la la				
	ec Recovery Fund, L.P.	Styplan Zery			6/8/0	<u></u>			
	ne of Signer (Print or Type) hen Zuppello	Title of Signer (Print or T Senior Managing Directo Deltec Partners LLC, Ger	r of Deltec Asset N	lana	gement LLC, I	Member Ma	mager of		
¹ Tl	e Partnership shall pay all reasonable and customary expens I not pay occupancy or personnel costs. The Partnership pay Worth. These fees cannot be quantified at present.	es including organizational of	costs, legal and acc						